

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2005</b> <i>(Fees pursuant to the Consolidated Appropriations act, 2005 (H.R. 4818).)</i>		Docket No. <b>190250-1280</b>	
Application Number: <b>10/755,491</b>		Filed: <b>January 12, 2004</b>	
For: <b>Intelligent Interactive Call Handling</b>			
Art Unit: <b>2614</b>		Examiner: <b>Ramakrishnaiah, Melur</b>	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fees</u>	<u>Small Entity</u> <u>Fees</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 <b><u>\$120.00</u></b>
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225      \$_____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510      \$_____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795      \$_____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080      \$_____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiencies in fees which may be required, or credit any overpayment to Deposit Account No. 20-0778.			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the			
<input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <b><u>47,283</u></b>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
_____ / CWG / <b>Charles W. Griggers, Reg. No. 47,283</b>		_____ <b>September 28, 2007</b> Date  _____ <b>770-933-9500</b> Telephone Number	